Customer No. 26308

Docket No. 9261.16756-CIP X

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Aboul-Hosn et al.

09/440.462

15 November 1999

For:

Pulmonary and Circulatory Blood Flow Support Devices and Methods for Heart Surgery

Procedures

Mail Stop RCE **Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

Group Art Unit: 3738

Examiner: J. Blanco

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL (37 C.F.R. § 1.114)

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

(Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant NOTE: application filed prior to June 8, 1995.)

1. SUBMISSION REQUIRED UNDER 37 CFR §1.114: Previously submitted A. [] Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on (Any unentered amendment(s) referred to above will be entered.) Consider the arguments in the Appeal Brief or Reply Brief previously filed on [] [] Other B. [x] **Enclosed** Amendment/Reply [x] Affidavit(s)/Declaration(s) [] Information Disclosure Statement (IDS)] Other 2. **MISCELLANEOUS** Suspension of action on the above-identified application is requested under 37 CFR A. [] §1.103(c) for a period of _____ months B. [] Other

CERTIFICATE OF MAILING UNDER 37 CFR 1.8(a)

I hereby certify that, on the date shown below, this correspondence is being deposited with the United States Postal Service in an envelope addressed as follows: Mail Stop RCE, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.

Date	19 October 2004	
-		

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3.			OF TIME ngs herein ar	e for a patent application and the	ne provisions of 37 CFR 1.136 apply			
				(complete (a) or (b) as applica	able)			
	(a)	[]		petitions for an extension of t) for the total number of months	ime under 37 CFR 1.136 (fees: 37 CF s checked below:	R		
[] [] []	Extension (months) one month two months three months four months five months			Fee for other than <u>Small Entity</u> \$ 110.00 \$ 430.00 \$ 980.00 \$ 1530.00 \$ 2080.00	Fee for <u>Small Entity</u> \$ 55.00 \$ 215.00 \$ 490.00 \$ 765.00 \$ 1040.00			
			Fe	ee: \$				
	If an a	If an additional extension of time is required please consider this a petition therefor,						
			(check	and complete the next item, if	applicable)			
	[]	ady been secured and the fee paid there I fee due for the total months of extension	efo on					
		Extension fee due with this request: \$						
				OR				
	(b)	[x]			rm is required. However, this condition			

FEE FOR CLAIMS

overlooked the need for a petition for extension of time.

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee (Small Entity)	Additional Fee (Large Entity)
Total Claims 37 CFR 1.16(c)*	23	- 46 =	(23)	x \$ 9.00	\$0	\$0
Independent Claims (37 CFR 1.16(b)**	2	11 =	13	x \$ 44.00	\$0	\$0
First Presentation of Multiple Dependent claim(s) if any (37 CFR 1.16(d))				\$150.00	\$0	\$0
Total Additional Fee					\$0	

If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20". If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed. "After final rejection or action (S 1.113) amendments may be made cancelling claims **WARNING:** or complying with any requirement of form which has been made." 37 CFR S 1.116(a) (emphasis added). (complete (c) or (d) as applicable) No additional fee for claims is required. (c) [x] **OR** Total additional fee for claims required \$_____. (d) 1 5. FEES The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 06-2360 RCE fee required under 37 CFR §1.17(e) [x] Extension of Time Fee (37 CFR §§1.136 and 1.17) [x] IDS Fee (\$180.00) [x] Additional Claim Fees [x] Other B. **RCE Fee** [x] \$790.00 (large entity) \$395.00 (small entity) [x] C. [] Extension Fee: [] IDS Fee (\$180.00) D. Additional Claim Fee _____ E. [] TOTAL FEES ENCLOSED: \$395.00

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Title:

Pulmonary and Circulatory Blood Flow Support Devices and Methods for Heart

Surgery Procedures

AMENDMENT D SUBMITTED WITH A REQUEST FOR CONTINUED EXAMINATION

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

This Amendment responds to the Office Action mailed July 26, 2004, which was designated a Final Action.

A Request for Continued Examination has been filed to respond to the Office Action and to advance prosecution. The requisite fee accompanies this Amendment.

Please amend the application as follows: